EF-58-AH-R21-0522-44000149-1 BOE-58-AH (P1) REV. 21 (05-22)

## **CLAIM FOR REASSESSMENT EXCLUSION FOR** TRANSFER BETWEEN PARENT AND CHILD



## **Sheri Thomas County of Santa Cruz Assessor**

701 Ocean Street, Rm. 130 Santa Cruz, CA 95060 Phone: 831-454-2002

Email: asrwebmail@co.santa-cruz.ca.us

NAME AND MAILING ADDRESS
(Make necessary corrections to the printed name and mailing address.)

L					
A. PROPERTY					
ASSESSOR'S PARCEL/ID NUMBER					
PROPERTY ADDRESS		CITY			
RECORDER'S DOCUMENT NUMBER		DATE OF PURCHASE OR TRANSFER			
PROBATE NUMBER (if applicable)	DATE OF DEATH (if applicable)	DATE OF DECREE OF DISTRIBUTION (if applicable)			
States Code, section 405(c)(2)(C)(i) which author	rizes the use of social security numbers for cial security number may provide a tax ide n <mark>d</mark> the state to monitor the exclusion limit.	Taxation Code section 63.1. [See Title 42 United identification purposes in the administration of any ntification number issued by the Internal Revenue			
1. Print full name(s) of transferor(s)	and the second s				
2. Social security number(s)					
3. Family relationship(s) to transferee(s)					
If adopted, age at time of adoption					
4. Was this property the tr <mark>ansferor's pri</mark> ncipal r					
	exemptions was granted or was eligible to be	e granted on this property:			
☐ Homeowners' Exemption ☐ Disabled \					
<ol><li>Have there been other transfers that qualified</li></ol>					
		list should include for each property: the County, rers, and family relationship. Transferor's principal			
6. Was only a partial interest in the property tra	ansferred? 🗆 Yes 🗎 No If <b>yes</b> , percen	tage transferred %			
7. Was this property owned in joint tenancy?	☐ Yes ☐ No				
IMPORTANT: If the transfer was through the root trust and all amendments.	nedium of a will and/or trust, you must at	ttach a full and complete copy of the will and/			
	CERTIFICATION				
accompanying statements or documents, is true representative) of the transferees listed in Section	and correct to the best of my knowledge an C. I knowingly am granting this exclusion an	foregoing and all information hereon, including any d that I am the parent or child (or transferor's legal ad will not file a claim to transfer the base year value			
of my principal residence under Revenue and Tax. SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	DATE				
	TAIN LES TO WILL	DAIL			
SIGNATURE OF TRANSFEROR OR LEGAL REPRESENTATIVE	PRINTED NAME	DATE			
<b>&gt;</b>					
MAILING ADDRESS		DAYTIME PHONE NUMBER			
		( )			
CITY, STATE, ZIP		EMAIL ADDRESS			

(Please complete applicable information on reverse side.)
THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



C. TRA	NSFEREE(S)/BUYER(S) (ad	lditional transferees please comple	ete Section E below)				
1.	Print full name(s) of transferee	e(s)					
2.	2. Family relationship(s) to transferor(s)						
	If adopted, age at time of adop						
	If stepparent/stepchild relationship is involved, was parent still married to or in a registered domestic partnership registered with the California Secretary of State) with stepparent on the date of purchase or transfer? $\Box$ Yes $\Box$ No						
	If <b>no</b> , was the marriage or registered domestic partnership terminated by: $\Box$ Death $\Box$ Divorce/Termination of partnership						
	If terminated by death, had the surviving stepparent remarried or entered into a registered domestic partnership as of the date of purch or transfer? $\square$ Yes $\square$ No						
	If in-law relationship is involved, was the child-in-law still married to or in a registered domestic partnership with the child on the date purchase or transfer? $\Box$ Yes $\Box$ No						
	If <b>no,</b> was the marriage or registered domestic partnership terminated by:   Death Divorce/Termination of partnership						
	If terminated by death, had the surviving child-in-law remarried or entered into a registered domestic partnership as of the date of purchas or transfer?						
	3. ALLOCATION OF EXCLUSION (If the full cash value of the real property transferred exceeds the one million dollar value exclusion, the transferee must specify on an attachment to this claim the amount and allocation of the exclusion that is being sought.)						
		CERTIF	CATION				
represent the Rev	anying statements or docume ntative) of the transferors liste enue and Taxation Code.	nts, is true and correct to the best d in Section B; and that all of the t	of my knowledge and that	oing and <mark>all information her</mark> eon, including any I am the parent or child (or transferee's legal sferees within the meaning of section 63.1 o			
SIGNATUR	RE OF TRANSFEREE OR LEGAL REPR	ESENTATIVE PRINTED NAME	— BATE				
MAILING A	ADDRESS		DAYTIN	ME PHONE NUMBER			
CITY, STAT	TE, ZIP	<del>)()</del>	EMAIL.	ADDRESS			
Note: T	he Assessor may contact you	for additional information.					
D. ADD	DITIONAL TRANSFEROR(S)/	SELLER(S)					
	NAME	SOCIAL SECURITY NUMBER	SIGNATURE	RELATIONSHIP			
E. ADD	ITIONAL TRANSFEREE(S)/	UYER(S)					
		RELATIONSHIP					



## CLAIM FOR REASSESSMENT EXCLUSION FOR TRANSFER BETWEEN PARENT AND CHILD

Revenue and Taxation Code, Section 63.1

**IMPORTANT:** In order to qualify for this exclusion, a claim form must be completed and signed by the transferors and a transferee and filed with the Assessor. A claim form is timely filed if it is filed within three years after the date of purchase or transfer, or prior to the transfer of the real property to a third party, whichever is earlier. If a claim form has not been filed by the date specified in the preceding sentence, it will be timely if filed within six months after the date of mailing of a notice of supplemental or escape assessment for this property. If a claim is not timely filed, the exclusion will be granted beginning with the calendar year in which you file your claim. Complete all of Sections A, B, and C and answer each question or your claim may be denied. Proof of eligibility, including a copy of the transfer document, trust, or will, may be required. In situations where all information is not known by the due date, the parties should file this claim with as much information as possible, and later amend the claim with any revised information. **Please note**:

- 1. This exclusion only applies to transfers that occur on or after November 6, 1986 and on or before February 15, 2021.
- 2. In order to qualify, the real property must be transferred from parents to their children or children to their parents.
- 3. If you do not complete and return this form, it may result in this property being reassessed.
- 4. Revenue and Taxation Code section 63.1 provides, with certain limitations, that a "change in ownership" does not include the purchase or transfer of:
  - The principal residence between parents and children, and/or
  - The first \$1,000,000 of the factored base year value of other real property between parents and children.

NOTE: Effective January 1, 2009, Revenue and Taxation Code section 63.1(j) allows a county board of supervisors to authorize a one-time processing fee of not more than \$175 to recover costs incurred by the County Assessor due to the failure of an eligible transferee to file a claim for the parent-child change in ownership exclusion after two written requests have been sent to an eligible transferee by the County Assessor.

For transfers occurring on or after February 16, 2021, please file form BOE-19-P, Claim for Reassessment Exclusion for Transfer Between Parent and Child Occurring on or After February 16, 2021.





EF-58-AH-R21-0522-44000149